


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2006 8:00 am**  
**Secretary of State**

02-07-2006 90026 013 \*\*\*150.00

**DOCUMENT # F04000001071**

1. Entity Name  
**R.A. MAIZE CORP**



Principal Place of Business <b>2450 COLORADO AVE.          SUITE 400 WEST          SANTA MONICA, CA 90404</b>	Mailing Address <b>2450 COLORADO AVE.          SUITE 400 WEST          SANTA MONICA, CA 90404</b>
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**DO NOT WRITE IN THIS SPACE**



01262006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GLASSCO, KIM  
 950 WINTERPARK DR. #230  
 CASSELBERRY, FL 32707**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT MAIZE, RICHARD A 2450 COLORADO AVE. SANTA MONICA, CA 90404
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Richard Maize** 1/27/06 3103158600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #